PTO/SB/06 (12-04)

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PATENT APPLICATION FEE DETERMINATION RECORD  Substitute for Form PTO-875										Application or Docket Number		
APPLICATION AS FILED – PART I (Column 1) (Column 2)								SMALL	ENTITY	OR	OTHER SMALL	
	FOR		NUMBE	RFILED	NUMBE	NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
BASIC FEE (37 CFR 1.16(a), (b), or (c))			V	₩A	1	N/A		N/A		1	N/A	
SEARCH FEE (37 CFR 1.16(k), (i), or (m))			N	₩A		N/A		N/A			N/A	
EXAMINATION FEE			N	√A		N/A		N/A			N/A	
(37 CFR 1.16(o), (p), or (q)) TOTAL CLAIMS (37 CFR 1.16(i))				minus 20		•		x =		OR	x =	.,
INDEPENDENT CLAIMS (37 CFR 1.16(h))			minus 3 =			•		x =		J	x =	
APP FEE	LICATION SIZE	st is ac	If the specification and draw sheets of paper, the applicat is \$250 (\$125 for small entity additional 50 sheets or fracti 35 U.S.C. 41(a)(1)(G) and 3			ze fee due each ereof. See						
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))								N/A			N/A	
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL			TOTAL	
APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLA REMA AFT AMEND	INING ER		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)
	Total (37 CFR 1.16(i))	•		Minus	**	=		x =		OR	x =	
	Independent (37 CFR 1.16(h))	•		Minus	***	=		x =		OR	x =	
	Application Size Fee (37 CFR 1.16(s))											
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))							N/A		OR	N/A	
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT B		CLA REMAI AFT AMEND	MS NING ER MENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)
	Total (37 CFR 1.16(i))	* :	28	Minus	" 23	⁵ 5		x 25 =	125	OR	x =	
	Independent (37 CFR 1.16(h))	5		Minus	<sup></sup> 3	<sup>-</sup> 2		× 100 =	200	OR	x =	
	Application Size Fee (37 CFR 1.16(s))									]		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))							N/A		OR	N/A	
				•				TOTAL ADD'L FEE	325	OR	TOTAL ADD'L FEE	
	If the entry in o	olumn 1 is	less that	n the entr	y in column 2, writ	e "0" in column		#20°		J		L

"If the entry in Column 1 is less than the entry in column 2, write "0" in column 3.

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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\*\*To the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

\*\*\*This collection of information is required to column 1.

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